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DUMBER

ANT UNIT PAPER NO

DATE MAILED:

## NOTICE OF INSUFFICIENT FILING FEES

APPLICANT IS GIVEN 30 DAYS FROM THE DATE OF HAILING OF THIS NOTICE WITH WHICH TO SUBHIT THE BALANCE DUE. Extension of this 30 day period under CFR 1.136(a) will not be permitted. Failure to respond within this per will result in the application becoming abandoned. 35 U.S.C. 133.

The filing fees submitted in connection with this application are insufficient. See the attached Patent Application-Fee Determination Rec (Form PTO-875). The balance due for additional claims and/or multiple dependent claims is summarized below:

Print	Kame;:	Signature:						
	this action and the received additional for are being deposited with the U	L POSTAL SERVICE	ne feret close au	ed in an ourosispo	eddrawod (	<b>.</b>		
	CERTIFICATE	F KAILING		•				
Fee subm	itted \$	Signature						
APPLICAM	: PLEASE COMPLETE THIS PORTION	AND RETUR	N THIS	NOTICE	HITH	PAYH		
ATTACIDÆNT: P	PORU PRO-TR			Clerk of Group				
*	BALANCE DUX	= \$	<del></del>	·				
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□ <sub>.</sub> B. 1	Fees due in connection with the	e amendment	filed	on				
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□ ` <b>, .</b> . ;	Filing Fees due upon filing th	applicati	on	•		i		

## **BEST AVAILABLE COPY**

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2001

Application or Docket Number

dean oroz con

CLAIMS AS FILED - PART I (Column 1) (Column 2)				SMALL EN		OR	OTHER THAN SMALL ENTITY				
TOTAL CLAIMS		11.			RATE	FEE		RATE	FEE		
FOR		NUMBER F	ILED NUI	MBER EXTRA	BASIC FEE	370.00	OR	BASIC FEE	740.00		
TOTAL CHARGEABLE CLAIMS			// minus 20= *			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS U minus			ius 3 = * /		X42=	42 -	OR	X84=		BEST	
MULTIPLE DEPENDENT CLAIM PRESENT					+140=	7 -	OR	+280=		ST	
* If the difference in column 1 is less than zero, enter "0" in column 2					TOTAL	1112	OR	TOTAL		AVAIL	
			TOTAL	9/3	OIT	OTHER	THAN	<b>\Section</b>			
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)						SMALL		OR	SMALL	ENTITY	
NT A	A. G. 新文	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	BLE
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						TOTAL			TOTAL		1
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AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSL PAID FOR	PRESENT LY EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Ĭ M M M M	Total	*	Minus	**	=	X\$ 9=		OR	X\$18=		
NÄ K	Independent	*	Minus	***	=	X42=		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					AIM L	+140=		OR	+280=		1
						TOTAL		OR	TOTAL		1
		(Column 1)		(Column 2	2) (Column 3)	ADDIT. FEE			ADDIT. FEE	: <b></b>	1
NTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSI PAID FOR	PRESENT LY EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAI FEE	
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AMENDMENT	Independent	*	Minus	***	=	X42=		OR	X84=	1	1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+140=			+280=	1	7
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							<del>                                     </del>	OR	TOTA		-{
*	* If the "Highest Nu	mber Previously	Paid For" IN TH Paid For" IN TH	HS SPACE is les	ss than 20, enter "20. ss than 3, enter "3." is the highest number	ADDIT. FEE		OR ox in c	ADDIT. FEI	E <b>L</b>	1